



Aerobic Winter Challenge Team Receipt

Team Leaders: Please give this to your Worksite Coordinator with all of your team's cash and checks (made out to "Heartbeat"). Please alphabetize members by their last name – Thank you! Don't forget to have each of your team members sign the other side. You can give them a photocopy of the form to sign if they need to take it out of the office (ie for spouse's signatures) and include it with this form when you give it to the Worksite Coordinator.

AEROBIC WINTER CHALLENGE 2005-2006



LIVE BIG, TRY HARD, HAVE FUN!

COMPANY/ORGANIZATION: _____

TEAM NAME: _____

PARTICIPANT NAME (please print) (TL=TEAM LEADER)	beginner (b) or regular (r)	T-SHIRT *		AMOUNT RECEIVED		
		Size	Long sleeve (L) Short sleeve (S)	\$2 Entry Fee	T-shirt Money	Total Amount
TL:						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
		Total Amount Due: (* XXL t-shirts are an extra \$2)				

*Long Sleeved shirts: \$14 each, Short Sleeved shirts: \$11 each. Sizes available: Small, Medium, Large, XL, XXL (XXL = extra \$2)
All Aerobic Winter Challenge money is due to Worksite Coordinators by 10/28/05

Aerobic Winter Challenge 2005-2006 Terms of Agreement

COMPANY/ORGANIZATION: _____

TEAM NAME: _____

- 1) I will record my progress on the wall chart provided for each team or individual monthly activity log. My TEAM LEADER will send in this information monthly
- 2) I fully release the Coconino County Health Department and the Arizona Department of Health Services of any legal liability for consequences related to my involvement in the Aerobic Winter Challenge.
- 3) I understand that strenuous exercise may be hazardous for persons who are overweight, have high blood pressure, are over 30, have undiagnosed health problems, or have not participated in a regular exercise program. I further understand that Aerobic Winter Challenge participants are urged to consult their physician before taking part in the program.

I have read the three statements above and agree to follow them.

Participant's Printed Name	Participant's Signature
TL (Team Leader):	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	